

.05 Claim of Sexual Assault or Incest

REVISION 45
(01/01/17 - 12/31/17)

A child born during a mother or father's current Family Benefit Cap Period (FBCP) is exempt from the Family Benefit Cap Period policy and may be eligible for CA when the child was conceived as a result of a sexual assault or due to incest.

NOTE The exemption for a child born as a result of sexual assault or incest does not apply to an adopted child.

The parent or [nonparent caretaker relative](#) (NPCR) must complete the Claim of Sexual Assault (FAA-0260A) form indicating the child was born as a result of the assault or incest.

Unless evidence exists that disputes the participant's statement, accept the FAA-0260A and forward it to the [Office of Special Investigations](#) (OSI). Continue to process the case as the FAA-0260 referral is for potential investigation and no response is required from OSI.

OSI completes any action that they determine to be necessary.

In addition to the participant's written statement on the FAA-0260, the participant must present an acceptable document that verifies the claim. This includes, but is not limited to, the following:

- Law enforcement records
- Legal records
- Medical records

When the child is determined eligible for CA, complete the following:

- Key S (Sexual Assault) or I (Incest) in the WERE EXPT RSN AF field.
- Key IN in the PT field on **SEPA**.
- Document **CADO** with the following:
 - The type of acceptable document used to verify the claim
 - The name and date of birth of the child
 - The S or I WERE Exempt Reason Code was used
- Place the Benefit Cap Grid: Determining the BC Child (FAA-1302A) form or FAA1583A Electronic benefit Cap Determination unity form in the [case file\(g\)](#).